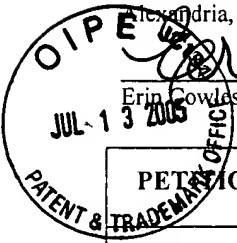


CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO at (703) 872-9306 or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on July 11, 2005.

Ref. No.: 12439-00046
(P108-US)



Erin Cowles
Erin Cowles

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005		Docket Number (Optional)																									
Application Number 09/710,539		Filed November 9, 2000																									
For Lithographic Type Microelectronic Spring Structures With Improved Contours																											
Art Unit 2833		Examiner Larisa Z. Tsukerman																									
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate for below):</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 40%;"></th> <th style="width: 15%; text-align: center;"><u>Fee</u></th> <th style="width: 15%; text-align: center;"><u>Small Entity Fee</u></th> <th style="width: 30%;"></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$120</td> <td style="text-align: center;">\$60</td> <td style="text-align: center;">\$ <u>120.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two month (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$450</td> <td style="text-align: center;">\$225</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Three month (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1020</td> <td style="text-align: center;">\$510</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Four month (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1590</td> <td style="text-align: center;">\$795</td> <td style="text-align: center;">\$</td> </tr> <tr> <td><input type="checkbox"/> Five month (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2160</td> <td style="text-align: center;">\$1080</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check that includes the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>500843</u>. I have enclosed a duplicate copy of this sheet.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</p> <p>I am the <input type="checkbox"/> applicant/inventor</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>39,923</u></p> <p><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration Number <u>39,923</u></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 60%;"> <p style="text-align: center;"><i>N. Kenneth Burraston</i></p> <p>N. Kenneth Burraston</p> </div> <div style="width: 35%; text-align: center;"> <p><u>July 11, 2005</u></p> <p>Date</p> <p><u>(801) 323-5934</u></p> <p>Telephone Number</p> </div> </div> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of _____ forms are submitted.</p>					<u>Fee</u>	<u>Small Entity Fee</u>		<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.00</u>	<input type="checkbox"/> Two month (37 CFR 1.17(a)(2))	\$450	\$225	\$	<input type="checkbox"/> Three month (37 CFR 1.17(a)(3))	\$1020	\$510	\$	<input type="checkbox"/> Four month (37 CFR 1.17(a)(4))	\$1590	\$795	\$	<input type="checkbox"/> Five month (37 CFR 1.17(a)(5))	\$2160	\$1080	\$
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